

MOUNT CARMEL MEDICAL & REHABILITATION  
677 EAST STATE STREET

BURLINGTON 53105 Phone: (262) 763-9531  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/03): 155  
Total Licensed Bed Capacity (12/31/03): 155  
Number of Residents on 12/31/03: 153

Ownership: Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 154

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		15.7
Supp. Home Care-Personal Care	No					1 - 4 Years		50.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.2	More Than 4 Years		19.0
Day Services	No	Mental Illness (Org./Psy)	30.7	65 - 74	8.5			----
Respite Care	No	Mental Illness (Other)	6.5	75 - 84	28.1			85.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	53.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	4.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.6		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.2		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	9.2	65 & Over	94.8	-----		
Transportation	No	Cerebrovascular	17.6	-----	-----	RNs		10.9
Referral Service	No	Diabetes	15.0	Gender	%	LPNs		8.4
Other Services	Yes	Respiratory	2.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	11.1	Male	22.9	Aides, & Orderlies		
Mentally Ill	No		----	Female	77.1			52.7
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

## Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	19	100.0	220	95	90.5	113	0	0.0	0	29	100.0	192	0	0.0	0	0	0.0	0	143	93.5
Intermediate	---	---	---	10	9.5	94	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	10	6.5
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	19	100.0		105	100.0		0	0.0		29	100.0		0	0.0		0	0.0		153	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	5.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.6	Bathing	5.2	52.3	42.5	153
Other Nursing Homes	2.4	Dressing	4.6	54.2	41.2	153
Acute Care Hospitals	89.4	Transferring	9.2	43.8	47.1	153
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	5.9	45.1	49.0	153
Rehabilitation Hospitals	0.0	Eating	50.3	28.8	20.9	153
Other Locations	1.8	*****				
Total Number of Admissions	170	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.5		Receiving Respiratory Care	10.5
Private Home/No Home Health	38.0	Occ/Freq. Incontinent of Bladder	58.8		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	3.6	Occ/Freq. Incontinent of Bowel	16.3		Receiving Suctioning	0.0
Other Nursing Homes	4.2				Receiving Ostomy Care	0.7
Acute Care Hospitals	6.0	Mobility			Receiving Tube Feeding	2.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.7		Receiving Mechanically Altered Diets	17.0
Rehabilitation Hospitals	0.0					
Other Locations	11.4	Skin Care			Other Resident Characteristics	
Deaths	36.7	With Pressure Sores	5.2		Have Advance Directives	73.9
Total Number of Discharges		With Rashes	9.8		Medications	
(Including Deaths)	166				Receiving Psychoactive Drugs	64.7

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	99.4	86.2	1.15	87.6	1.13	88.1	1.13	87.4	1.14
Current Residents from In-County	73.9	78.5	0.94	83.0	0.89	82.1	0.90	76.7	0.96
Admissions from In-County, Still Residing	20.6	17.5	1.18	19.7	1.05	20.1	1.02	19.6	1.05
Admissions/Average Daily Census	110.4	195.4	0.56	167.5	0.66	155.7	0.71	141.3	0.78
Discharges/Average Daily Census	107.8	193.0	0.56	166.1	0.65	155.1	0.70	142.5	0.76
Discharges To Private Residence/Average Daily Census	44.8	87.0	0.51	72.1	0.62	68.7	0.65	61.6	0.73
Residents Receiving Skilled Care	93.5	94.4	0.99	94.9	0.98	94.0	0.99	88.1	1.06
Residents Aged 65 and Older	94.8	92.3	1.03	91.4	1.04	92.0	1.03	87.8	1.08
Title 19 (Medicaid) Funded Residents	68.6	60.6	1.13	62.7	1.09	61.7	1.11	65.9	1.04
Private Pay Funded Residents	19.0	20.9	0.91	21.5	0.88	23.7	0.80	21.0	0.90
Developmentally Disabled Residents	0.0	0.8	0.00	0.8	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	37.3	28.7	1.30	36.1	1.03	35.8	1.04	33.6	1.11
General Medical Service Residents	11.1	24.5	0.45	22.8	0.49	23.1	0.48	20.6	0.54
Impaired ADL (Mean)	62.7	49.1	1.28	50.0	1.25	49.5	1.27	49.4	1.27
Psychological Problems	64.7	54.2	1.19	56.8	1.14	58.2	1.11	57.4	1.13
Nursing Care Required (Mean)	5.6	6.8	0.83	7.1	0.80	6.9	0.82	7.3	0.77